FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Mar 11 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # 600059 BRUMER, COHEN, KANDELL & KAUFMAN, P.A. Principal Place of Business Mailing Address MUSEUM TOWER, STE. 2600 MUSEUM TOWER, STE. 2600 150 W.FLAGLER ST. 150 W.FLAGLER ST. DO NOT WRITE IN THIS SPACE MIAMI FL 33130 MIAMI FL 33130 3. Date Incorporated or Qualified 11/01/1961 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-0814008 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 \$5.00 May Be City & State Cily & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees 28 23 Country B. This corporation owes or has paid the current year Intangible 24 29 Personal Property Tax due June 30. **Y**es 25 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent BRUMER, MICHAEL Kandell MUSEUM TOWER, STE. 2600 50 W. Flagler 150 W.FLAGLER ST. MIAMETEL 33130 05.02 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered ale of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered sliggifions of, Section 607.0505, Florida Statutes. 11. Pursuant A. Kandell, Pres. SIGNATURE Stephen_ ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE 1 1 THE TITLE **BRUMER.MICHAEL** 1.2 NAME NAME STREET ADDRESS 150 W.FLAGLER ST. 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition 21 TITLE TITLE Vice Pres. + Dir. COHEN, A. G. 22 NAME 150 W. FLAGLER ST. STREET ADDRESS 23 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2 4 City-\$1-ZIP DELETE Change Addition 31 TITLE TITLE KANDELL, STEPHEN A 3.2 NAME NAME STREET ADDRESS 150 W FLAGLER ST 3.3 STREET ADDRESS MIAM! FL CITY-ST-ZIP 3.4. CITY-ST-ZIP Addition DELETE Change 41 TITLE TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS Minni CITY-ST-ZIP 4.4 CITY-ST-ZIP Addition Change DELETE TITLE 5.1 TITLE 5.2 NAME 150 W. STREET ADDRESS 5.3 STREET ADDRESS Fingler 67. **#2600** CITY-ST-ZIP 5.4 CHY-S1-ZiP DELFIE Change Addition 6.1 THLE TITLE

1 Stephen A Kandell Pres. 224/98 (305) 374-2000 SIGNATURE:

6.2 NAME

6.3 STREET ADDRESS

thing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information in report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an intrustrue empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in it with an address

6.4 CITY - ST - ZIP

NAME

STREET ADDRESS

I hereby certify that the indicated on this army. officer or director of t Block 12 or Block 13

CITY-ST-ZIP